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PTO/SB/05 (03-01)

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Approved for use through 10/31/2002, OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

MS1-282USC12 Attorney Docket No. DeTreville First Inventor Method And Apparatus For Authenticating An Open Syster Application To A Portable IC Device

Date

Express Mail Label No. (Only for new nonprovisional applications under 37 CFR 1.53(b)) Mail Stop Patent Application APPLICATION ELEMENTS ADDRESS TO: Commissioner for Patents/P.O. Box 1450 Alexandria, VA 22313-1450 See MPEP chapter 600 concerning utility patent application contents. Fee Transmittal Form (e.g., PTO/SB/17) CD-ROM or CD-R in duplicate, large table or (Submit an original and a duplicate for fee processing) Computer Program (Appendix) Applicant claims small entity status. 8. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) Specification [Total Pages (preferred arrangement set forth below) Computer Readable Form (CRF) - Descriptive title of the invention Specification Sequence Listing on: - Cross Reference to Related Applications CD-ROM or CD-R (2 copies); or Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix Statements verifying identity of above copies - Background of the Invention - Brief Summary of the Invention ACCOMPANYING APPLICATION PARTS - Brief Description of the Drawings (if filed) - Detailed Description 9. Assignment Papers (cover sheet & document(s)) - Claim(s) 37 CFR 3.73(b) Statement Power of - Abstract of the Disclosure 10. Attorney (when there is an assignee) English Translation Document (if applicable) 13 11. 4. V Drawing(s) (35 U.S.C. 113) [Total Sheets Copies of IDS Information Disclosure 12. 5. Oath or Declaration [Total Pages Citations Statement (IDS)/PTO-1449 Preliminary Amendment Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) Return Receipt Postcard (MPEP 503) b. (for continuation/divisional with Box 18 completed) (Should be specifically itemized) Certified Copy of Priority Document(s) (if foreign priority is claimed) **DELETION OF INVENTOR(S)** Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR Nonpublication Request under 35 U.S.C. 122 16. 1.63(d)(2) and 1.33(b). (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. Application Data Sheet. See 37 CFR 1.76 17. Other: 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.:_ Examiner Darrow, J. Group Art Unit: 2132 Prior application information: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS ~ Correspondence address below Customer Number or Bar Code Label Name PATENT TRADEMARK OFFICE Address State City Zip Code Country Fax Telephone Allan T. Sponseller 38,318 Registration No. (Attorney/Agent) Name (Print/Type) Signature

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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PTO/SB/17 (01-03)
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FEE TRANSMITTAL Application Number for FY 2003 Filing Date First Named Inventor DeTreville Effective 01/01/2003: Patent fees are subject to annual revision. **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 Art Unit (\$) 750.00 MS1-282USC12

Check Credit card Money Order Other	TOTAL AMOUNT OF TATMENT	Attorney Docket No. IWS1-20203C12	
Deposit Account: Deposit Account Number Deposit Account Name The Commissioner is authorized to: (check all that apply) Charge fee(s) indicated below Charge any additional fee(s) during the pendency of this application Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account. TEE CALCULATION 1. BASIC FILING FEE Large Entity Small Entity Fee Fee Fee Fee Fee Fee Peacheription Fee Paid 1. 12-0769 1. 1052	METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)	
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1005 160 2005 80 Provisional filing fee 1451 1,510 1451 1,510 Petition to institute a public use proceeding		1451 1,510 1451 1,510 Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 750.00 1452 110 2452 55 Petition to revive - unavoidable		1452 110 2452 55 Petition to revive - unavoidable	
1453 1.300 2453 650 Petition to revive - unintentional		1453 1,300 2453 650 Petition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE 1501 1,300 2501 650 Utility issue fee (or reissue)		1501 1,300 2501 650 Utility issue fee (or reissue)	
Ext <u>ra Claims below Fee Paid</u> 1502 470 2502 235 Design issue fee	Extra Claims below Fee Paid		
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Claims	Claims	1460 130 1460 130 Petitions to the Commissioner	
Multiple Dependent 1807 50 1807 50 Processing fee under 37 CFR 1.17(q)	' ' ' '	1807 50 1807 50 Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity Fee Fee Fee Fee Description 1806 180 1806 180 Submission of Information Disclosure Stmt			
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1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in excess of 3 1809 750 2809 375 Filling a submission after final rejection (37 CFR 1.129(a))	1232 13 2332 1	1809 750 2809 375 Filing a submission after final rejection	
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1204 84 2204 42 ** Reissue independent claims over original patent 1801 750 2801 375 Request for Continued Examination (RCE)			
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SUBTOTAL (2) (\$) 0.00 Other fee (specify)	SUBTOTAL (2) (\$) 0.00	Other fee (specify)	
*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) *Reduced by Basic Filing Fee Paid SUBTOTAL (3)	SUBTUTAL (2)		

SUBMITTED BY (Complete (if applicable) Registration No. Telephone (509) 324-9256 38,318 Name (Print/Type) Allan T. Sponsellen (Attorney/Agent) Signature

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